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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *RB*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *RB*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IL	SHEETS DRAWING 14	TOTAL CLAIMS 41	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged	Allowance <i>[Signature]</i> Examiner's Signature	<i>RB</i> Initials			

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## TITLE

Combination shipping label and packing slip form

FILING FEE RECEIVED 1148	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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